

UNITED STATES DISTRICT COURT  
DISTRICT OF NEW JERSEY

U.S. DISTRICT COURT  
DISTRICT OF NEW JERSEY  
RECEIVED

2017 MAR 24 A 9 00

Robert FACILHNER

**Complaint for Employment  
Discrimination**

(In the space above enter the full name(s) of the plaintiff(s).)

Case No. \_\_\_\_\_

(to be filled in by the Clerk's Office)

**-against-**

MANISCHewitz co

Bea Scotti

Jury Trial: ☐ Yes ☐ No  
(check one)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>Robert Faulkner</u>
Street Address	<u>32 Cambridge Rd.</u>
City and County	<u>Verona n. J. 07044</u>
State and Zip Code	<u>Essex County</u>
Telephone Number	<u>973.857.8930</u>

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

## Defendant No. 1

Name	<u>MANISCHEWITZ CO</u>
Job or Title (if known)	<u></u>
Street Address	<u>80 Ave K</u>
City and County	<u>NEWARK ESSEX</u>
State and Zip Code	<u>N. J. 07105</u>
Telephone Number	<u>201.553.1100</u>
E-mail Address (if known)	<u></u>

## Defendant No. 2

Name	<u>Bea Scotti</u>
Job or Title (if known)	<u>VP, HR, + LABOR Relation</u>
Street Address	<u>80 Ave K</u>
City and County	<u>NEWARK ESSEX</u>

State and Zip Code N.J. 07105  
Telephone Number 201-553-1100  
E-mail Address \_\_\_\_\_  
(if known) \_\_\_\_\_

Defendant No. 3

Name \_\_\_\_\_  
Job or Title \_\_\_\_\_  
(if known) \_\_\_\_\_  
Street Address \_\_\_\_\_  
City and County \_\_\_\_\_  
State and Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
(if known) \_\_\_\_\_

Defendant No. 4

Name \_\_\_\_\_  
Job or Title \_\_\_\_\_  
(if known) \_\_\_\_\_  
Street Address \_\_\_\_\_  
City and County \_\_\_\_\_  
State and Zip Code \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
(if known) \_\_\_\_\_

**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is:

Name MANISCHWITZ CO  
Street Address 80 AVE K  
City and County NEWARK ESSEX  
State and Zip Code N.J. 07105  
Telephone Number 201-553-1100

## II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to (*check all that apply*):



Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

*(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*



Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

*(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)*



Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

*(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*



Other federal law (*specify the federal law*):



Relevant state law (*specify, if known*):



Relevant city or county law (*specify, if known*):

## III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes (*check all that apply*):

- ☐ Failure to hire me.
- ☒ Termination of my employment.
- ☐ Failure to promote me.
- ☐ Failure to accommodate my disability.
- ☐ Unequal terms and conditions of my employment.
- ☐ Retaliation.
- ☐ Other acts (*specify*): \_\_\_\_\_

*(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)*

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)

3.24.16 - 4.4.16

C. I believe that defendant(s) (*check one*):

- ☒ is/are still committing these acts against me.
- ☐ is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (*check all that apply and explain*):

- ☒ race \_\_\_\_\_
- ☐ color \_\_\_\_\_
- ☐ gender/sex \_\_\_\_\_
- ☐ religion \_\_\_\_\_
- ☐ national origin \_\_\_\_\_
- ☐ age. My year of birth is \_\_\_\_\_. (*Give your year of birth only if you are asserting a claim of age discrimination.*)
- ☐ disability or perceived disability (*specify disability*) \_\_\_\_\_

- E. The facts of my case are as follows. Attach additional pages if needed.

*the facts are the one on the  
statement on e.e.o.c  
statement complaint  
thank you*

*(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)*

#### IV. Exhaustion of Federal Administrative Remedies

- A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

*7.22.16*

- B. The Equal Employment Opportunity Commission (check one):

☐

has not issued a Notice of Right to Sue letter.

☒

issued a Notice of Right to Sue letter, which I received on (date)

*1.24.17*

*(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)*

- C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

☐

60 days or more have elapsed.

☐

less than 60 days have elapsed.

**V. Relief**

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

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**VI. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a non-frivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 3-24, 2017

Signature of Plaintiff

Printed Name of Plaintiff

Robert Faulkner  
ROBERT FAULKNER

**B. For Attorneys**

Date of signing: \_\_\_\_\_, 20\_\_.

Signature of Attorney \_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Name of Law Firm \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_



EEOC Form 161-B (11/16)

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION**  
**NOTICE OF RIGHT TO SUE (ISSUED ON REQUEST)**

To: **Robert L. Faulkner**  
**32 Cambridge Road**  
**Verona, NJ 07044**

From: **Newark Area Office**  
**283-299 Market Street**  
**Two Gateway Center, Suite 1703**  
**Newark, NJ 07102**



On behalf of person(s) aggrieved whose identity is  
 CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

**524-2016-01089**

EEOC Representative

**Rayba Watson, Enforcement Supervisor**

Telephone No.

**(973) 645-6021**

*(See also the additional information enclosed with this form.)*

**NOTICE TO THE PERSON AGGRIEVED:**

**Title VII of the Civil Rights Act of 1964, the Americans with Disabilities Act (ADA), or the Genetic Information Nondiscrimination Act (GINA):** This is your Notice of Right to Sue, issued under Title VII, the ADA or GINA based on the above-numbered charge. It has been issued at your request. Your lawsuit under Title VII, the ADA or GINA **must be filed in a federal or state court WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)



More than 180 days have passed since the filing of this charge.



Less than 180 days have passed since the filing of this charge, but I have determined that it is unlikely that the EEOC will be able to complete its administrative processing within 180 days from the filing of this charge.



The EEOC is terminating its processing of this charge.



The EEOC will continue to process this charge.

**Age Discrimination in Employment Act (ADEA):** You may sue under the ADEA at any time from 60 days after the charge was filed until 90 days after you receive notice that we have completed action on the charge. In this regard, **the paragraph marked below applies to your case:**



The EEOC is closing your case. Therefore, your lawsuit under the ADEA **must be filed in federal or state court WITHIN 90 DAYS of your receipt of this Notice**. Otherwise, your right to sue based on the above-numbered charge will be lost.

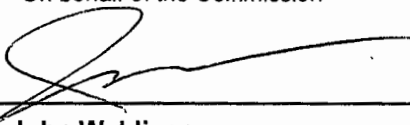


The EEOC is continuing its handling of your ADEA case. However, if 60 days have passed since the filing of the charge, you may file suit in federal or state court under the ADEA at this time.

**Equal Pay Act (EPA):** You already have the right to sue under the EPA (filing an EEOC charge is not required.) EPA suits must be brought in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

If you file suit, based on this charge, please send a copy of your court complaint to this office.

On behalf of the Commission

  
**John Waldinger,**  
**Area Office Director**

**JAN 24 2017**

*(Date Mailed)*

Enclosures(s)

CC: **Bea Scotti**  
**VP, HR & Labor Relations**  
**THE MANISCHEWITZ COMPANY**  
**80 Ave. K**  
**Newark, NJ 07105**

Enclosure with EEOC  
Form 161-B (11/16)

**INFORMATION RELATED TO FILING SUIT  
UNDER THE LAWS ENFORCED BY THE EEOC**

*(This information relates to filing suit in Federal or State court under Federal law.  
If you also plan to sue claiming violations of State law, please be aware that time limits and other  
provisions of State law may be shorter or more limited than those described below.)*

**PRIVATE SUIT RIGHTS -- Title VII of the Civil Rights Act, the Americans with Disabilities Act (ADA),  
the Genetic Information Nondiscrimination Act (GINA), or the Age  
Discrimination in Employment Act (ADEA):**

In order to pursue this matter further, you must file a lawsuit against the respondent(s) named in the charge **within 90 days of the date you receive this Notice**. Therefore, you should **keep a record of this date**. Once this 90-day period is over, your right to sue based on the charge referred to in this Notice will be lost. If you intend to consult an attorney, you should do so promptly. Give your attorney a copy of this Notice, and its envelope, and tell him or her the date you received it. Furthermore, in order to avoid any question that you did not act in a timely manner, it is prudent that your suit be filed **within 90 days of the date this Notice was mailed to you** (as indicated where the Notice is signed) or the date of the postmark, if later.

Your lawsuit may be filed in U.S. District Court or a State court of competent jurisdiction. (Usually, the appropriate State court is the general civil trial court.) Whether you file in Federal or State court is a matter for you to decide after talking to your attorney. Filing this Notice is not enough. You must file a "complaint" that contains a short statement of the facts of your case which shows that you are entitled to relief. Courts often require that a copy of your charge must be attached to the complaint you file in court. If so, you should remove your birth date from the charge. Some courts will not accept your complaint where the charge includes a date of birth. Your suit may include any matter alleged in the charge or, to the extent permitted by court decisions, matters like or related to the matters alleged in the charge. Generally, suits are brought in the State where the alleged unlawful practice occurred, but in some cases can be brought where relevant employment records are kept, where the employment would have been, or where the respondent has its main office. If you have simple questions, you usually can get answers from the office of the clerk of the court where you are bringing suit, but do not expect that office to write your complaint or make legal strategy decisions for you.

**PRIVATE SUIT RIGHTS -- Equal Pay Act (EPA):**

EPA suits must be filed in court within 2 years (3 years for willful violations) of the alleged EPA underpayment: back pay due for violations that occurred **more than 2 years (3 years) before you file suit** may not be collectible. For example, if you were underpaid under the EPA for work performed from 7/1/08 to 12/1/08, you should file suit **before 7/1/10** -- not 12/1/10 -- in order to recover unpaid wages due for July 2008. This time limit for filing an EPA suit is separate from the 90-day filing period under Title VII, the ADA, GINA or the ADEA referred to above. Therefore, if you also plan to sue under Title VII, the ADA, GINA or the ADEA, in addition to suing on the EPA claim, suit must be filed within 90 days of this Notice and within the 2- or 3-year EPA back pay recovery period.

**ATTORNEY REPRESENTATION -- Title VII, the ADA or GINA:**

If you cannot afford or have been unable to obtain a lawyer to represent you, the U.S. District Court having jurisdiction in your case may, in limited circumstances, assist you in obtaining a lawyer. Requests for such assistance must be made to the U.S. District Court in the form and manner it requires (you should be prepared to explain in detail your efforts to retain an attorney). Requests should be made well before the end of the 90-day period mentioned above, because such requests do not relieve you of the requirement to bring suit within 90 days.



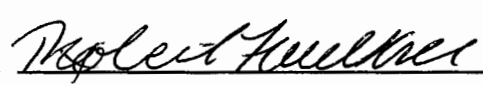
**ATTORNEY REFERRAL AND EEOC ASSISTANCE -- All Statutes:**

You may contact the EEOC representative shown on your Notice if you need help in finding a lawyer or if you have any questions about your legal rights, including advice on which U.S. District Court can hear your case. If you need to inspect or obtain a copy of information in EEOC's file on the charge, please request it promptly in writing and provide your charge number (as shown on your Notice). While EEOC destroys charge files after a certain time, all charge files are kept for at least 6 months after our last action on the case. Therefore, if you file suit and want to review the charge file, **please make your review request within 6 months of this Notice**. (Before filing suit, any request should be made within the next 90 days.)

***IF YOU FILE SUIT, PLEASE SEND A COPY OF YOUR COURT COMPLAINT TO THIS OFFICE.***

EEOC Form 5 (11/09)

<b>CHARGE OF DISCRIMINATION</b> This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC <span style="float: right;"><b>524-2016-01089</b></span>	
<b>New Jersey Division On Civil Rights</b> and EEOC <i>State or local Agency, if any</i>			
Name (indicate Mr., Ms., Mrs.) <b>Mr. Robert Faulkner</b>		Home Phone (Incl. Area Code) <b>(973) 857-8930</b>	Date of Birth <b>10-16-1968</b>
Street Address City, State and ZIP Code <b>32 Cambridge Rd., Verona, NJ 07044</b>			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name <b>MANISCHEWITZ</b>		No. Employees, Members <b>Unknown</b>	Phone No. (Include Area Code) <b>(201) 553-1100</b>
Street Address City, State and ZIP Code <b>80 Ave. K, Newark, NJ 07105</b>			
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address City, State and ZIP Code			
DISCRIMINATION BASED ON (Check appropriate box(es).) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest: <b>03-24-2016</b> Latest: <b>04-04-2016</b> <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <p><b>I was hired by the above named employer on or about October 11, 2015. My most recent position title was that of General Helper.</b></p> <p><b>On or about March 15, 2016, I became incarcerated for a charge that was ultimately dismissed. Nonetheless, I was suspended on March 24, 2016 and eventually terminated on April 4, 2016. The reason for my termination that was first provided to me was that it was because my incarceration was due to a violent act. The company later changed their reason and indicated that my termination was due to lay-offs caused by low sales margins. I feel my race may have been a factor in the decision to separate my employment.</b></p> <p><b>Accordingly, I feel I have been discriminated against on the basis of race (Black), in violation of Title VII of the Civil Rights Act of 1964, as amended (Title VII).</b></p>			

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures. I declare under penalty of perjury that the above is true and correct.	NOTARY – When necessary for State and Local Agency Requirements I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT  SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year) <b>7-22-2016</b> 
Jul 22, 2016 Date	 Charging Party Signature



CP Enclosure with EEOC Form 5 (11/09)

**PRIVACY ACT STATEMENT:** Under the Privacy Act of 1974, Pub. Law 93-579, authority to request personal data and its uses are:

1. **FORM NUMBER/TITLE/DATE.** EEOC Form 5, Charge of Discrimination (11/09).
2. **AUTHORITY.** 42 U.S.C. 2000e-5(b), 29 U.S.C. 211, 29 U.S.C. 626, 42 U.S.C. 12117, 42 U.S.C. 2000ff-6.
3. **PRINCIPAL PURPOSES.** The purposes of a charge, taken on this form or otherwise reduced to writing (whether later recorded on this form or not) are, as applicable under the EEOC anti-discrimination statutes (EEOC statutes), to preserve private suit rights under the EEOC statutes, to invoke the EEOC's jurisdiction and, where dual-filing or referral arrangements exist, to begin state or local proceedings.
4. **ROUTINE USES.** This form is used to provide facts that may establish the existence of matters covered by the EEOC statutes (and as applicable, other federal, state or local laws). Information given will be used by staff to guide its mediation and investigation efforts and, as applicable, to determine, conciliate and litigate claims of unlawful discrimination. This form may be presented to or disclosed to other federal, state or local agencies as appropriate or necessary in carrying out EEOC's functions. A copy of this charge will ordinarily be sent to the respondent organization against which the charge is made.
5. **WHETHER DISCLOSURE IS MANDATORY; EFFECT OF NOT GIVING INFORMATION.** Charges must be reduced to writing and should identify the charging and responding parties and the actions or policies complained of. Without a written charge, EEOC will ordinarily not act on the complaint. Charges under Title VII, the ADA or GINA must be sworn to or affirmed (either by using this form or by presenting a notarized statement or unsworn declaration under penalty of perjury); charges under the ADEA should ordinarily be signed. Charges may be clarified or amplified later by amendment. It is not mandatory that this form be used to make a charge.

#### **NOTICE OF RIGHT TO REQUEST SUBSTANTIAL WEIGHT REVIEW**

Charges filed at a state or local Fair Employment Practices Agency (FEPA) that dual-files charges with EEOC will ordinarily be handled first by the FEPA. Some charges filed at EEOC may also be first handled by a FEPA under worksharing agreements. You will be told which agency will handle your charge. When the FEPA is the first to handle the charge, it will notify you of its final resolution of the matter. Then, if you wish EEOC to give Substantial Weight Review to the FEPA's final findings, you must ask us in writing to do so within 15 days of your receipt of its findings. Otherwise, we will ordinarily adopt the FEPA's finding and close our file on the charge.

#### **NOTICE OF NON-RETALIATION REQUIREMENTS**

Please **notify** EEOC or the state or local agency where you filed your charge **if retaliation is taken against you or others** who oppose discrimination or cooperate in any investigation or lawsuit concerning this charge. Under Section 704(a) of Title VII, Section 4(d) of the ADEA, Section 503(a) of the ADA and Section 207(f) of GINA, it is unlawful for an *employer* to discriminate against present or former employees or job applicants, for an *employment agency* to discriminate against anyone, or for a *union* to discriminate against its members or membership applicants, because they have opposed any practice made unlawful by the statutes, or because they have made a charge, testified, assisted, or participated in any manner in an investigation, proceeding, or hearing under the laws. The Equal Pay Act has similar provisions and Section 503(b) of the ADA prohibits coercion, intimidation, threats or interference with anyone for exercising or enjoying, or aiding or encouraging others in their exercise or enjoyment of, rights under the Act.

EEOC Form 161-B (11/16)

## U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

## NOTICE OF RIGHT TO SUE (ISSUED ON REQUEST)

To: Robert L. Faulkner  
32 Cambridge Road  
Verona, NJ 07044

From: Newark Area Office  
283-299 Market Street  
Two Gateway Center, Suite 1703  
Newark, NJ 07102

☐

On behalf of person(s) aggrieved whose identity is  
CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

524-2016-01089

EEOC Representative

Rayba Watson, Enforcement Supervisor

Telephone No.

(973) 645-6021

(See also the additional information enclosed with this form.)

## NOTICE TO THE PERSON AGGRIEVED:

**Title VII of the Civil Rights Act of 1964, the Americans with Disabilities Act (ADA), or the Genetic Information Nondiscrimination Act (GINA):** This is your Notice of Right to Sue, issued under Title VII, the ADA or GINA based on the above-numbered charge. It has been issued at your request. Your lawsuit under Title VII, the ADA or GINA **must be filed in a federal or state court WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

☒

More than 180 days have passed since the filing of this charge.

☐

Less than 180 days have passed since the filing of this charge, but I have determined that it is unlikely that the EEOC will be able to complete its administrative processing within 180 days from the filing of this charge.

☒

The EEOC is terminating its processing of this charge.

☐

The EEOC will continue to process this charge.

**Age Discrimination in Employment Act (ADEA):** You may sue under the ADEA at any time from 60 days after the charge was filed until 90 days after you receive notice that we have completed action on the charge. In this regard, the paragraph marked below applies to your case:

☐

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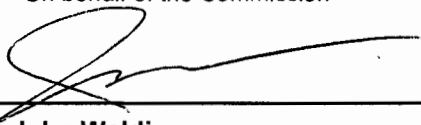
☐

The EEOC is continuing its handling of your ADEA case. However, if 60 days have passed since the filing of the charge, you may file suit in federal or state court under the ADEA at this time.

**Equal Pay Act (EPA):** You already have the right to sue under the EPA (filing an EEOC charge is not required.) EPA suits must be brought in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible**.

If you file suit, based on this charge, please send a copy of your court complaint to this office.

On behalf of the Commission

  
\_\_\_\_\_  
John Waldinger,  
Area Office Director

JAN 24 2017

(Date Mailed)

Enclosures(s)

CC: Bea Scotti  
VP, HR & Labor Relations  
THE MANISCHEWITZ COMPANY  
80 Ave. K  
Newark, NJ 07105



Enclosure with EEOC  
Form 161-B (11/16)

**INFORMATION RELATED TO FILING SUIT  
UNDER THE LAWS ENFORCED BY THE EEOC**

*(This information relates to filing suit in Federal or State court under Federal law.  
If you also plan to sue claiming violations of State law, please be aware that time limits and other  
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In order to pursue this matter further, you must file a lawsuit against the respondent(s) named in the charge **within 90 days of the date you receive this Notice**. Therefore, you should **keep a record of this date**. Once this 90-day period is over, your right to sue based on the charge referred to in this Notice will be lost. If you intend to consult an attorney, you should do so promptly. Give your attorney a copy of this Notice, and its envelope, and tell him or her the date you received it. Furthermore, in order to avoid any question that you did not act in a timely manner, it is prudent that your suit be filed **within 90 days of the date this Notice was mailed to you** (as indicated where the Notice is signed) or the date of the postmark, if later.

Your lawsuit may be filed in U.S. District Court or a State court of competent jurisdiction. (Usually, the appropriate State court is the general civil trial court.) Whether you file in Federal or State court is a matter for you to decide after talking to your attorney. Filing this Notice is not enough. You must file a "complaint" that contains a short statement of the facts of your case which shows that you are entitled to relief. Courts often require that a copy of your charge must be attached to the complaint you file in court. If so, you should remove your birth date from the charge. Some courts will not accept your complaint where the charge includes a date of birth. Your suit may include any matter alleged in the charge or, to the extent permitted by court decisions, matters like or related to the matters alleged in the charge. Generally, suits are brought in the State where the alleged unlawful practice occurred, but in some cases can be brought where relevant employment records are kept, where the employment would have been, or where the respondent has its main office. If you have simple questions, you usually can get answers from the office of the clerk of the court where you are bringing suit, but do not expect that office to write your complaint or make legal strategy decisions for you.

**PRIVATE SUIT RIGHTS -- Equal Pay Act (EPA):**

EPA suits must be filed in court within 2 years (3 years for willful violations) of the alleged EPA underpayment: back pay due for violations that occurred **more than 2 years (3 years) before you file suit** may not be collectible. For example, if you were underpaid under the EPA for work performed from 7/1/08 to 12/1/08, you should file suit **before 7/1/10 – not 12/1/10** -- in order to recover unpaid wages due for July 2008. This time limit for filing an EPA suit is separate from the 90-day filing period under Title VII, the ADA, GINA or the ADEA referred to above. Therefore, if you also plan to sue under Title VII, the ADA, GINA or the ADEA, in addition to suing on the EPA claim, suit must be filed within 90 days of this Notice and within the 2- or 3-year EPA back pay recovery period.

**ATTORNEY REPRESENTATION -- Title VII, the ADA or GINA:**

If you cannot afford or have been unable to obtain a lawyer to represent you, the U.S. District Court having jurisdiction in your case may, in limited circumstances, assist you in obtaining a lawyer. Requests for such assistance must be made to the U.S. District Court in the form and manner it requires (you should be prepared to explain in detail your efforts to retain an attorney). Requests should be made well before the end of the 90-day period mentioned above, because such requests do not relieve you of the requirement to bring suit within 90 days.

**ATTORNEY REFERRAL AND EEOC ASSISTANCE -- All Statutes:**

You may contact the EEOC representative shown on your Notice if you need help in finding a lawyer or if you have any questions about your legal rights, including advice on which U.S. District Court can hear your case. If you need to inspect or obtain a copy of information in EEOC's file on the charge, please request it promptly in writing and provide your charge number (as shown on your Notice). While EEOC destroys charge files after a certain time, all charge files are kept for at least 6 months after our last action on the case. Therefore, if you file suit and want to review the charge file, **please make your review request within 6 months of this Notice**. (Before filing suit, any request should be made within the next 90 days.)

***IF YOU FILE SUIT, PLEASE SEND A COPY OF YOUR COURT COMPLAINT TO THIS OFFICE.***

"Relief"

my claim is 25,368 to  
date of lost wages  
do to my termination  
for my pain and  
suffering for the  
lack to pay bills  
and child support  
going from one  
job to another  
trying to make  
means meet and to  
be rehired of my job.

thank you  
Robert Faulkner

## ESSEX COUNTY

### Probation Division, Child Support Enforcement

PO BOX 372

CHILD SUPPORT ENF UNIT

NEWARK, NJ 07101-0372

Website: [www.njchildsupport.org](http://www.njchildsupport.org)



(877)655-4371

Fax: (973)693-6407

**ROBERT L. FAULKNER**

**32 CAMBRIDGE RD**

**VERONA, NJ 07044-3003**

**HATCHER MELISSA**

Plaintiff ☒ Obligor ☐ Obligor

vs.

**FAULKNER ROBERT L**

Defendant ☐ Obligor ☒ Obligor

**SUPERIOR COURT OF NEW JERSEY  
CHANCERY DIVISION, FAMILY PART**

Docket No: **FD-07-002409-07**

Case ID: **CS31991533D**

### NOTICE OF MOTION TO ENFORCE LITIGANT'S RIGHTS

You are summoned and required to appear for the enforcement of the Support Order as a result of your failure to comply as described in the attached certification.

#### Report To:

Date: **04/06/2017**

Time: **01:30 PM**

Location: **HEARING ROOM 1, ROOM 1122, 212 WASHINGTON ST RM**

**1122,, HEARING RM 1, 11TH FL, NEWARK, NJ 07102-2990**

Directions: [www.njchildsupport.org](http://www.njchildsupport.org).

You must appear at this hearing. Your failure to appear may result in the issuance of a warrant for your arrest and/or the entry of a default order.

At this hearing, one or more of the following enforcement remedies may be applied: income withholding against your present and future income, incarceration (jail), entry of a judgment in the amount of the arrears due, which may be filed as a lien against your real or personal property, the posting of bond or other security to ensure future payments, or other relief as allowed by Court Rules 1:10-3 and 5:7-5.

You may bring an attorney, although one is not required. If you require assistance in selecting an attorney, you may contact the County Lawyer Service at (973)622-6204. If you can not afford an attorney, you may contact the County Legal Services office at

If this matter is heard by a Child Support Hearing Officer, the hearing officer will make a recommendation to the court for the enforcement of the support obligation. If you disagree with that recommendation, you may request that the case be reviewed by a Judge.

Please be advised that when a child support payment becomes past due, a judgment in the amount of the arrears is created by operation of law under N.J.S.A. 2A:17-56.23a. Such judgment automatically results in a lien against your real or personal property and, may be subject to post-judgment interest, at the rates prescribed by Court Rule 4:42-11.

**02/22/2017**

Date

**MICHELE MORA**

Probation Child Support Manager



CS040,53916217

131\DEDRA.OGUNJOBI\CS31991533D\35194266





**State of New Jersey  
STATE DISBURSEMENT UNIT  
PO BOX 5485  
TRENTON , NJ 08638-0485  
Telephone: (877)655-4371**

Office of Child Support Services

**Notice of Non Custodial Parent (NCP) Payment History**

Date: **03/23/2017**

(Balances valid as of Print date)

Dear: **ROBERT L FAULKNER**

**"ESTE DOCUMENTO CONTIENE INFORMACION IMPORTANTE PARA USTED. SI NO  
ENTIENDE INGLES, USTED DEBE DE BUSCAR A ALGUIEN QUE SE LO TRADUZCA".**

The following information provides a summary of your payment details during the last 24 months. If you have any questions concerning this notice, please contact the **New Jersey Family Support Services Center** at **(877)655-4371**.

Case ID: **CS31991533D**

Current Balance Due: **\$ 17,065.31**

Docket No.: **FD-07-002409-07**

Arrears Payback Amount: **\$ 39.00**

CP: **MELISSA HATCHER**

Arrears Payback Frequency: **WEEKLY**

Total Money Distributed for the Time Period: **\$ 4,789.01**

Current Obligation		
Debt Type	Obligation Amount	Frequency(Due)
<b>CHILD SUPPORT</b>	<b>\$ 61.00</b>	<b>W(03/24/2017/Fri)</b>

As of today, a total of **\$ 0** is on hold and not yet applied to your case(s). If money currently on hold is subsequently released and distributed, those funds may apply to one or more of your cases.

Payment Details				
Receipt Date	Transaction Date	Receipt Number	Receipt Source	Receipt Amount
03/20/2017	03/20/2017	03/20/2017-0031-001-276	UNEMPLOYMENT COMPENSATION (UIB)	\$ 100.00
03/13/2017	03/13/2017	03/13/2017-0024-001-372	UNEMPLOYMENT COMPENSATION (UIB)	\$ 100.00
03/06/2017	03/06/2017	03/06/2017-0032-001-469	UNEMPLOYMENT COMPENSATION (UIB)	\$ 100.00
12/29/2016	12/29/2016	12/29/2016-0004-528-034	EMPLOYER WAGE	\$ 98.96
12/13/2016	12/13/2016	12/13/2016-0004-514-029	EMPLOYER WAGE	\$ 100.00
12/07/2016	12/07/2016	12/07/2016-0006-337-045	EMPLOYER WAGE	\$ 100.00
12/05/2016	12/05/2016	12/05/2016-0018-013-028	EMPLOYER WAGE	\$ 100.00
11/14/2016	11/14/2016	11/14/2016-0016-136-018	EMPLOYER WAGE	\$ 100.00
11/07/2016	11/07/2016	11/07/2016-0017-160-032	EMPLOYER WAGE	\$ 100.00
10/31/2016	10/31/2016	10/31/2016-0014-097-017	EMPLOYER WAGE	\$ 100.00
10/17/2016	10/17/2016	10/17/2016-0019-169-028	EMPLOYER WAGE	\$ 100.00
10/11/2016	10/11/2016	10/11/2016-0017-333-034	EMPLOYER WAGE	\$ 100.00
10/04/2016	10/04/2016	10/04/2016-0003-319-031	EMPLOYER WAGE	\$ 100.00
09/26/2016	09/26/2016	09/26/2016-0008-430-033	EMPLOYER WAGE	\$ 100.00
09/06/2016	09/06/2016	09/06/2016-0035-001-867	UNEMPLOYMENT COMPENSATION (UIB)	\$ 100.00



+ Melissa Satchel



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION  
Newark Area Office

Two Gateway Center- Suite 1703  
283-299 Market Street  
Newark, NJ 07102-5233  
Intake Information Group: (800) 669-4000  
Intake Information Group TTY: (800) 669-6820  
Newark Status Line: (866) 408-8075  
Newark Direct Dial: (973) 645-4684  
TTY (973) 645-3004  
FAX (973) 645-4524  
Website: [www.eeoc.gov](http://www.eeoc.gov)

February 3, 2017

Robert L. Faulkner  
32 Cambridge Road  
Verona, NJ 07044

Dear Mr. Faulkner:

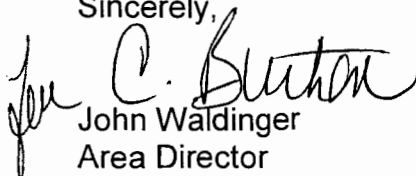
Re: EEOC Number: 524-2016-01089, Faulkner v. The Manischewitz Company

This is in response to your recent request for copies of the charges filed referenced above:

- ☒ Please complete the enclosed EEOC Form 167, Agreement of Nondisclosure, and return it to this office.
- ☐ 90 days have passed since the Notice of Dismissal and Notice of Right to Sue was issued; please submit a copy of the court filing in this case; otherwise your request will be denied.
- ☐ Please remit to this office a certified check or money order payable to **American Legal Copying & Document Services, Inc.**, in the amount of \_\_\_\_\_ to cover processing and copying costs. **(NO PERSONAL CHECKS!)**

Upon receipt of the above item(s), processing of your request for a copy of the above-referenced investigative file will continue.

Sincerely,

  
John Waldinger  
Area Director

RECEIVED  
2017 FEB -7 AM 11:27  
EEOC NEWARK  
AREA OFFICE



**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION**  
**Newark Area Office**

Two Gateway Center, Suite 1703  
283-299 Market Street  
Newark, NJ 07102-5233  
Intake Information Group: (800) 669-4000  
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Newark Direct Dial: (973) 645-4684  
TTY (973) 645-3004  
FAX (973) 645-4524  
Website: [www.eeoc.gov](http://www.eeoc.gov)

February 8, 2017

Robert L. Faulkner  
32 Cambridge Road  
Verona, NJ 07044

**Re: EEOC Charge# 524-2016-01089, Faulkner v. The Manischewitz Company**

Dear Mr. Faulkner:

Attached please find copies of the information/material regarding the above mentioned EEOC charge file as per your request.

Sincerely,

A handwritten signature in black ink, appearing to read "John Waldinger", is written over the typed name.

John Waldinger  
Area Director

JW:cb

**Manischewitz Co**

Business Report Prepared 12/6/2016

**Business Profile**

Company Name **Manischewitz Co**  
 Phone Number **(201) 553-1100**  
 Address **80 Avenue K**  
 City, State & ZIP **Newark, NJ 07105**  
 Web site **www.rabfoodgroup.com**  
 Number of Employees **Unknown**  
 Annual Revenue **\$100 to 500 Million**  
 Type Of Business **Food Preparations**  
 Years In Business **10 or More Years**

**Additional Contacts**

David Yale  
 Chief Executive Officer  
 (201) 553-1100

Steven Grossman  
 Chief Financial Officer  
 (201) 553-1100

Davis Rosi  
 Chief Marketing Officer  
 (201) 553-1100

Carol Parker  
 Executive Officer  
 (201) 553-1100

Robert Solot  
 Executive Officer  
 (201) 553-1100

Randall Copeland  
 Executive Officer  
 (201) 553-1100

Stuart Goldberg  
 Executive Officer  
 (201) 553-1100

Deborah Ross  
 Executive Officer  
 (201) 553-1100

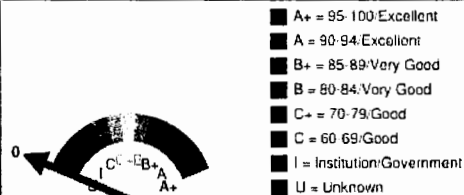
Susan Bubenias  
 Manager  
 (201) 553-1100

**Nearby Businesses**

Feury Marketing Inc  
 85 Avenue K  
 Newark, NJ 07105  
 (973) 465-0900  
 Type of business:  
 Distance (Miles): .0193

X Tech  
 61 Avenue K  
 Newark, NJ 07105  
 (973) 817-8000  
 Type of business:  
 Distance (Miles): .0385

Extech Industries  
 61 Avenue K  
 Newark, NJ 07105  
 (973) 274-3340

**Business Credit Rating****Area Competitors**

Sheris Cookery  
 33 Delancey St  
 Newark NJ 07105  
 Type of business:  
 Distance (Miles): .9891

Rex Wine Vinegar Co  
 830 Raymond Blvd  
 Newark NJ 07105  
 Type of business:  
 Distance (Miles): 1.0822

Vienor Foods International  
 120 Orchard St  
 Newark NJ 07102  
 Type of business:  
 Distance (Miles): 1.525

Golden Tropics  
 1489 McCarter Hwy  
 Newark NJ 07104  
 Type of business:  
 Distance (Miles): 3.0261

Paderno  
 1180 McLester St Ste B  
 Elizabeth NJ 07201  
 Type of business:  
 Distance (Miles): 3.6152

Aapka Big Bazaar  
 831 Newark Ave  
 Jersey City NJ 07306  
 Type of business:  
 Distance (Miles): 4.467

Papetti's Egg Products  
 100 Trumbull St  
 Elizabeth NJ 07206  
 Type of business:  
 Distance (Miles): 4.622

New York Fish House  
 32-34 Papetti Plz  
 Elizabeth NJ 07206  
 Type of business:  
 Distance (Miles): 4.714

Oasis Trading Co Inc  
 465 Hillside Ave  
 Hillside NJ 07205  
 Type of business:  
 Distance (Miles): 4.7455

Han Jin Food Products  
 124 Brunswick St  
 Jersey City NJ 07302  
 Type of business:  
 Distance (Miles): 5.1349



**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION**  
**Newark Area Office**

Two Gateway Center, Suite 1703  
283-299 Market Street  
(973) 645-4689  
TTY (973) 645-3004  
FAX (973) 645-4524

**Our Ref: Charge Number 524-2016-01089**  
**Robert Faulkner v. Manischewitz Co.**

Mr. Robert L. Faulkner  
32 Cambridge Rd.  
Verona, NJ 07044

Dear Mr. Faulkner,

This is to confirm that I have been assigned to investigate the above charge of discrimination. Enclosed with this letter is a copy of the Respondent's Position Statement with non-confidential attachments. By accepting these documents, you agree that you will only share the contents with persons in a privileged relationship to you, such as a spouse, clergy, or legal, medical or financial advisor.

The evidence of record, which includes the evidence and information submitted by you and by Respondent, concerning the above referenced charge, has been reviewed. A copy of Respondent's position regarding your allegations of discrimination is enclosed.

In order for the Commission to issue a determination that there is reasonable cause to believe that you were discriminated against because of race as alleged in your charge, the record of evidence would have to support a conclusion that the Respondent took this into account in its actions.

If you wish to provide a response to Respondent's position please submit any further evidence in support of your charge in writing within twenty (20) calendar days of the date of this letter. If no further evidence is received a determination will be made based on the current record of evidence.

Sincerely,

A handwritten signature in black ink, appearing to read "W. McGovern", is written over a horizontal line.

William McGovern  
Investigator  
(973) 645-2624

January 4, 2017

Date





December 19, 2016

U.S. Equal Employment Commission – Newark Area Office

283-299 Market Street

Two Gateway Center, Suite 1703

Newark, NJ 07102

Enforcement Supervisor – Rayba Watson

Re: EEOC charge No.:524-2016-01089 Robert Faulkner

Dear Ms. Watson,

I just received a letter from your organization addressed to our Former CEO, David Yale regarding the above charge. My apologies first of all, I never received the electronic notice and Mr. Yale has not been employed here since 2010.

I am electronically sending you via the eeoc respondent website the documentation and correspondence that was mailed to former Employee Robert Faulkner and his Union, Local #359.

As stated in those documents, Mr. Faulkner was employed with The Manischewitz Company from 10/11/2015 to 03/10/2016 in the position of General Helper 2<sup>nd</sup> shift – Matzo Line.

Mr. Faulkner was a no-show from 03/11/2016 to 03/25/2016 which in accordance to the actual labor Agreement, Article XV, section I is determined as immediate termination of employment. On 03/28/2016 Mr. Faulkner showed up at work with documentation (also attached) that he had been incarcerated during that time. The charge was Domestic Violence and it also stated that Mr. Faulkner was out on bail and awaiting further court charges.

We informed Mr. Faulkner that he had a week to bring in any documentation acquitting him from the charges, but he never returned.

We understand that people make mistakes and we have employed many employees with a criminal record (we knew of Mr. Faulkner's criminal past). As long as it is not murder or child/woman molestation, we believe that everyone deserves a second chance. But we also do not tolerate any type

threat. Therefore due to the type of charge, our constant obligation of providing our employees with a safe and harass free environment and our need to fill the position, we had no alternative but to terminate Mr. Faulkner from his employment on April 4<sup>th</sup>, 2016.

Our position of termination stands.

Please do not hesitate to contact me if you should require additional information.

Sincerely,

Bea Scotti

VP, Human Resources and Labor Relations

The Manischewitz Company

201-553-1100 ext 2800

Bea.scotti@manischewitz.com



## EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

## AGREEMENT OF NONDISCLOSURE

Pursuant to Section 705g(1) of Title VII, the EEOC shall have power to cooperate with private individuals in order to accomplish the purposes of Title VII. This same authority also applies to actions under the Americans with Disabilities Act.

## PERSON REQUESTING DISCLOSURE

X	CHARGING PARTY		RESPONDENT		AGGRIEVED PERSON ON WHOSE BEHALF CHARGE		AGGRIEVED PERSON IN COMMISSIONER		NAMED PARTY IN CLASS ACTION
	ATTORNEY REPRESENTING <input type="checkbox"/> CP <input type="checkbox"/> R		<input type="checkbox"/>	AGGRIEVED PERSON ON WHOSE BEHALF CHARGE IS FILED		<input type="checkbox"/>	AGGRIEVED PERSON IN COMMISSIONER CHARGE		<input type="checkbox"/> NAMED PARTY IN CLASS ACTION

CHARGE NUMBER(S) OF FILE(S) TO BE DISCLOSED

ROBERT FAULKNER V. THE MANISCHEWITZ COMPANY

524-2016-01089

RECEIVED  
2017 FEB -7 AM 11:27  
EEOC NEW YORK  
AREA OFFICE

I, Robert Faulkner request disclosure of Commission case file(s) in

connection with contemplated or pending litigation. I agree that the information disclosed to me will not be made public or used except in the normal course of a civil action or other proceeding instituted under Title VII or the Americans with Disabilities Act involving such information.

In witness whereof, this agreement is entered into as of 7 day of Feb. 20 17  
by the Equal Employment Opportunity Commission representative named below and the person requesting disclosure.

Robert Faulkner 973-857-8930

Person requesting disclosure (Signature and telephone number/area code)

32 Cambridge Rd

32 CA VERONA N.J. 07044

Complete address

EEOC representative (Signature and title)

**Memorandum for Record**

January 24, 2017

To whom it may concern:

My name is Robert L. Faulkner and I hereby request the right to sue and the termination of the U.S. Equal Employment Opportunity's investigation into the matters related to:

Charge #524-2016-01089 Faulkner v. Manischewitz

Regards,

Robert. L. Faulkner

*Robert Faulkner*  
*1/24/17*



**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION**  
**Newark Area Office**

Two Gateway Center, Suite 1703  
283-299 Market Street  
(973) 645-4689  
TTY (973) 645-3004  
FAX (973) 645-4524

**Our Ref: Charge Number 524-2016-01089**  
**Robert Faulkner v. Manischewitz Co.**

Mr. Robert L. Faulkner  
32 Cambridge Rd.  
Verona, NJ 07044

Dear Mr. Faulkner,

This is to confirm that I have been assigned to investigate the above charge of discrimination. Enclosed with this letter is a copy of the Respondent's Position Statement with non-confidential attachments. By accepting these documents, you agree that you will only share the contents with persons in a privileged relationship to you, such as a spouse, clergy, or legal, medical or financial advisor.

The evidence of record, which includes the evidence and information submitted by you and by Respondent, concerning the above referenced charge, has been reviewed. A copy of Respondent's position regarding your allegations of discrimination is enclosed.

In order for the Commission to issue a determination that there is reasonable cause to believe that you were discriminated against because of race as alleged in your charge, the record of evidence would have to support a conclusion that the Respondent took this into account in its actions.

If you wish to provide a response to Respondent's position please submit any further evidence in support of your charge in writing within twenty (20) calendar days of the date of this letter. If no further evidence is received a determination will be made based on the current record of evidence.

Sincerely,

A handwritten signature in black ink, appearing to read "William McGovern", is written over a horizontal line.

William McGovern  
Investigator  
(973) 645-2624

January 4, 2017

Date

## "Statement of claim"

I was hired by the  
marushevitz co. on  
or about oct 11, 2015  
on or about march  
15, 2016 I became  
incarcerated for a  
charge that was  
ultimately dismissed  
I was suspended  
on march 24, 2016  
and terminated on  
april 4, 2016 as I  
tried to seek legal  
help they change it  
to a lay off due  
to low sales but  
i was in the union  
and at <sup>that</sup> they time  
they have non union  
workers working 40+  
plus hours a week  
I feel my race played  
a factor in my decision  
to separate my

EEOC Form 5 (11/09)

<b>CHARGE OF DISCRIMINATION</b> <small>This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.</small>		Charge Presented To:      Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC <b>524-2016-01089</b>	
<b>New Jersey Division On Civil Rights</b> and EEOC <small>State or local Agency, if any</small>			
Name (indicate Mr., Ms., Mrs.) <b>Mr. Robert Faulkner</b>		Home Phone (Incl. Area Code) <b>(973) 857-8930</b>	Date of Birth <b>10-16-1968</b>
Street Address      City, State and ZIP Code <b>32 Cambridge Rd., Verona, NJ 07044</b>			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name <b>MANISCHEWITZ</b>		No. Employees, Members <b>Unknown</b>	Phone No. (Include Area Code) <b>(201) 553-1100</b>
Street Address      City, State and ZIP Code <del>50 Ave K, Newark, NJ 07195</del>			
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address      City, State and ZIP Code			
DISCRIMINATION BASED ON (Check appropriate box(es).) <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest      Latest <b>03-24-2016      04-04-2016</b> <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <b>I was hired by the above named employer on or about October 11, 2015. My most recent position title was that of General Helper.</b>  <b>On or about March 15, 2016, I became incarcerated for a charge that was ultimately dismissed. Nonetheless, I was suspended on March 24, 2016 and eventually terminated on April 4, 2016. The reason for my termination that was first provided to me was that it was because my incarceration was due to a violent act. The company later changed their reason and indicated that my termination was due to lay-offs caused by low sales margins. I feel my race may have been a factor in the decision to separate my employment.</b>  <b>Accordingly, I feel I have been discriminated against on the basis of race (Black), in violation of Title VII of the Civil Rights Act of 1964, as amended (Title VII).</b>			

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.

I declare under penalty of perjury that the above is true and correct.

NOTARY - When necessary for State and Local Agency Requirements

I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.

SIGNATURE OF COMPLAINANT

*Robert Faulkner*



CP Enclosure with EEOC Form 5 (11/09)

**PRIVACY ACT STATEMENT:** Under the Privacy Act of 1974, Pub. Law 93-579, authority to request personal data and its uses are:

1. **FORM NUMBER/TITLE/DATE.** EEOC Form 5, Charge of Discrimination (11/09).
2. **AUTHORITY.** 42 U.S.C. 2000e-5(b), 29 U.S.C. 211, 29 U.S.C. 626, 42 U.S.C. 12117, 42 U.S.C. 2000ff-6
3. **PRINCIPAL PURPOSES.** The purposes of a charge, taken on this form or otherwise reduced to writing (whether later recorded on this form or not) are, as applicable under the EEOC anti-discrimination statutes (EEOC statutes), to preserve private suit rights under the EEOC statutes, to invoke the EEOC's jurisdiction and, where dual-filing or referral arrangements exist, to begin state or local proceedings.
4. **ROUTINE USES.** This form is used to provide facts that may establish the existence of matters covered by the EEOC statutes (and as applicable, other federal, state or local laws). Information given will be used by staff to guide its mediation and investigation efforts and, as applicable, to determine, conciliate and litigate claims of unlawful discrimination. This form may be presented to or disclosed to other federal, state or local agencies as appropriate or necessary in carrying out EEOC's functions. A copy of this charge will ordinarily be sent to the respondent organization against which the charge is made.
5. **WHETHER DISCLOSURE IS MANDATORY; EFFECT OF NOT GIVING INFORMATION.** Charges must be reduced to writing and should identify the charging and responding parties and the actions or policies complained of. Without a written charge, EEOC will ordinarily not act on the complaint. Charges under Title VII, the ADA or GINA must be sworn to or affirmed (either by using this form or by presenting a notarized statement or unsworn declaration under penalty of perjury); charges under the ADEA should ordinarily be signed. Charges may be clarified or amplified later by amendment. It is not mandatory that this form be used to make a charge.

#### NOTICE OF RIGHT TO REQUEST SUBSTANTIAL WEIGHT REVIEW

Charges filed at a state or local Fair Employment Practices Agency (FEPA) that dual-files charges with EEOC will ordinarily be handled first by the FEPA. Some charges filed at EEOC may also be first handled by a FEPA under worksharing agreements. You will be told which agency will handle your charge. When the FEPA is the first to handle the charge, it will notify you of its final resolution of the matter. Then, if you wish EEOC to give Substantial Weight Review to the FEPA's final findings, you must ask us in writing to do so within 15 days of your receipt of its findings. Otherwise, we will ordinarily adopt the FEPA's finding and close our file on the charge.

#### NOTICE OF NON-RETALIATION REQUIREMENTS

Please **notify** EEOC or the state or local agency where you filed your charge **if retaliation is taken against you or others** who oppose discrimination or cooperate in any investigation or lawsuit concerning this charge. Under Section 704(a) of Title VII, Section 4(d) of the ADEA, Section 503(a) of the ADA and Section 207(f) of GINA, it is unlawful for an *employer* to discriminate against present or former employees or job applicants, for an *employment agency* to discriminate against anyone, or for a *union* to discriminate against its members or membership applicants, because they have opposed any practice made unlawful by the statutes, or because they have made a charge, testified, assisted, or participated in any manner in an investigation, proceeding, or hearing under the laws. The Equal Pay Act has similar provisions and Section 503(b) of the ADA prohibits coercion, intimidation, threats or interference with anyone for exercising or enjoying, or aiding or encouraging others in their exercise or enjoyment of, rights under the Act.



# U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION INTAKE QUESTIONNAIRE

RECEIVED

Please immediately complete this entire form and return it to the U.S. Equal Employment Opportunity Commission ("EEOC"). **REMEMBER**, a charge of employment discrimination must be filed within the time limits imposed by law, within 180 days or in some places within 300 days of the alleged discrimination. When we receive this form, we will review it to determine EEOC coverage. **Answer all questions completely, and attach additional pages if needed to complete your responses. If you do not know the answer to a question, answer by stating "not known."** If a question is not applicable, write "N/A." (PLEASE PRINT)

## 1. Personal Information

Last Name: Faulkner First Name: Robert MI: L  
 Street or Mailing Address: 32 Cambridge Rd Apt or Unit #: \_\_\_\_\_  
 City: Verona County: Essex State: N.J. Zip: 07044  
 Phone Numbers: Home: (973) 857-8930 Work: (\_\_\_\_\_) \_\_\_\_\_  
 Cell: (646) 353-2138 Email Address: \_\_\_\_\_  
 Date of Birth: 10/16/68 Sex: ☒ Male ☐ Female Do You Have a Disability? ☐ Yes ☒ No

Please answer each of the next three questions. i. Are you Hispanic or Latino? ☐ Yes ☐ No

ii. What is your Race? Please choose all that apply. ☐ American Indian or Alaskan Native ☐ Asian ☐ White  
☒ Black or African American ☐ Native Hawaiian or Other Pacific Islander

iii. What is your National Origin (country of origin or ancestry)? \_\_\_\_\_

Please Provide The Name Of A Person We Can Contact If We Are Unable To Reach You:

Name: Hazel Faulkner Relationship: mother  
 Address: 32 Cambridge City: Verona State: N.J. Zip Code: 07044  
 Home Phone: (973) 857-8930 Other Phone: (\_\_\_\_\_) \_\_\_\_\_

## 2. I believe that I was discriminated against by the following organization(s): (Check those that apply)

☒ Employer ☒ Union ☐ Employment Agency ☐ Other (Please Specify) \_\_\_\_\_

**Organization Contact Information** (If the organization is an employer, provide the address where you actually worked. If you work from home, check here and provide the address of the office to which you reported.) **If more than one employer is involved, attach additional sheets.**

Organization Name: MANISCHewitz  
 Address: 80 AVE 14 County: Essex  
 City: NEWARK State: N.J. Zip: 07105 Phone: (201) 553-1100  
 Type of Business: FACTORY Job Location if different from Org. Address: \_\_\_\_\_  
 Human Resources Director or Owner Name: BEA. SCOTI Phone: (201) 553-1100  
 Number of Employees in the Organization at All Locations: Please Check (✓) One EXT 2800  
☐ Fewer Than 15 ☐ 15 - 100 ☐ 101 - 200 ☒ 201 - 500 ☐ More than 500

## 3. Your Employment Data (Complete as many items as you are able.) Are you a federal employee? ☐ Yes ☒ No

Date Hired: 10/11/15 Job Title At Hire: General Helper  
 Pay Rate When Hired: 9.00 Last or Current Pay Rate: 9.00  
 Job Title at Time of Alleged Discrimination: G. Helper Date Quit/Discharged: 4/4/16  
 Name and Title of Immediate Supervisor: milly

If Job Applicant, Date You Applied for Job 10/11/15 Job Title Applied For MACHINE OPERATOR

**4. What is the reason (basis) for your claim of employment discrimination?**

FOR EXAMPLE, if you feel that you were treated worse than someone else because of race, you should check the box next to Race. If you feel you were treated worse for several reasons, such as your sex, religion and national origin, you should check all that apply. If you complained about discrimination, participated in someone else's complaint, or filed a charge of discrimination, and a negative action was threatened or taken, you should check the box next to Retaliation.

☒ Race ☐ Sex ☐ Age ☐ Disability ☐ National Origin ☐ Religion ☐ Retaliation ☐ Pregnancy ☐ Color (typically a difference in skin shade within the same race) ☐ Genetic Information; circle which type(s) of genetic information is involved: i. genetic testing ii. family medical history iii. genetic services (genetic services means counseling, education or testing)

If you checked color, religion or national origin, please specify: B/L

If you checked genetic information, how did the employer obtain the genetic information? \_\_\_\_\_

Other reason (basis) for discrimination (Explain): \_\_\_\_\_

**5. What happened to you that you believe was discriminatory? Include the date(s) of harm, the action(s), and the name(s) and title(s) of the person(s) who you believe discriminated against you. Please attach additional pages if needed.**

(Example: 10/02/06 – Discharged by Mr. John Soto, Production Supervisor)

A. Date: 3-24-16 Action: 3/24/16 SUSPENDED THEN 4/4/16 TERMINATED THEN 4/27/16 LAYED OFF OF LOW SALES

Name and Title of Person(s) Responsible: BEA. SCOTI

B. Date: 3/24/16 Action: SAME AS ABOVE

Name and Title of Person(s) Responsible \_\_\_\_\_

**6. Why do you believe these actions were discriminatory? Please attach additional pages if needed.**

**7. What reason(s) were given to you for the acts you consider discriminatory? By whom? His or Her Job Title?**

8. Describe who was in the same or similar situation as you and how they were treated. For example, who else applied for the same job you did, who else had the same attendance record, or who else had the same performance? Provide the race, sex, age, national origin, religion, or disability of these individuals, if known, and if it relates to your claim of discrimination. For example, if your complaint alleges race discrimination, provide the race of each person; if it alleges sex discrimination, provide the sex of each person; and so on. Use additional sheets if needed.

**Of the persons in the same or similar situation as you, who was treated better than you?**

Full Name	Race, sex, age, national origin, religion or disability	Job Title	Description of Treatment
-----------	---	-----------	--------------------------

A. \_\_\_\_\_

B. \_\_\_\_\_



**Of the persons in the same or similar situation as you, who was treated *worse* than you?**

<u>Full Name</u>	<u>Race, sex, age, national origin, religion or disability</u>	<u>Job Title</u>	<u>Description of Treatment</u>
------------------	--	------------------	---------------------------------

A. \_\_\_\_\_

B. \_\_\_\_\_

**Of the persons in the same or similar situation as you, who was treated the *same* as you?**

<u>Full Name</u>	<u>Race, sex, age, national origin, religion or disability</u>	<u>Job Title</u>	<u>Description of Treatment</u>
------------------	--	------------------	---------------------------------

A. \_\_\_\_\_

B. \_\_\_\_\_

Answer questions 9-12 only if you are claiming discrimination based on disability. If not, skip to question 13. Please tell us if you have more than one disability. Please add additional pages if needed.

9. Please check all that apply:

- ☐ Yes, I have a disability  
☐ I do not have a disability now but I did have one  
☐ No disability but the organization treats me as if I am disabled

10. What is the disability that you believe is the reason for the adverse action taken against you? Does this disability prevent or limit you from doing anything? (e.g., lifting, sleeping, breathing, walking, caring for yourself, working, etc.).

\_\_\_\_\_

\_\_\_\_\_

11. Do you use medications, medical equipment or anything else to lessen or eliminate the symptoms of your disability?

☐ Yes ☐ No

If "Yes," what medication, medical equipment or other assistance do you use?

\_\_\_\_\_

\_\_\_\_\_

12. Did you ask your employer for any changes or assistance to do your job because of your disability?

☐ Yes ☐ No

If "Yes," when did you ask? \_\_\_\_\_ How did you ask (verbally or in writing)? \_\_\_\_\_

Who did you ask? (Provide full name and job title of person)

\_\_\_\_\_

Describe the changes or assistance that you asked for: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How did your employer respond to your request? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

13. Are there any witnesses to the alleged discriminatory incidents? If yes, please identify them below and tell us what they will say. (Please attach additional pages if needed to complete your response)

Full Name	Job Title	Address & Phone Number	What do you believe this person will tell us?
-----------	-----------	------------------------	---

A. \_\_\_\_\_

B. \_\_\_\_\_

14. Have you filed a charge previously on this matter with the EEOC or another agency? ☐ Yes ☒ No

15. If you filed a complaint with another agency, provide the name of agency and the date of filing: \_\_\_\_\_

16. Have you sought help about this situation from a union, an attorney, or any other source? ☒ Yes ☐ No  
Provide name of organization, name of person you spoke with and date of contact. Results, if any?

LEGAL AID OF N.J.

Please check one of the boxes below to tell us what you would like us to do with the information you are providing on this questionnaire. If you would like to file a charge of job discrimination, you must do so either within 180 days from the day you knew about the discrimination, or within 300 days from the day you knew about the discrimination if the employer is located in a place where a state or local government agency enforces laws similar to the EEOC's laws. **If you do not file a charge of discrimination within the time limits, you will lose your rights. If you would like more information before filing a charge or you have concerns about EEOC's notifying the employer, union, or employment agency about your charge, you may wish to check Box 1. If you want to file a charge, you should check Box 2.**

**BOX 1** ☐ I want to talk to an EEOC employee before deciding whether to file a charge. I understand that by checking this box, I have not filed a charge with the EEOC. I also understand that I could lose my rights if I do not file a charge in time.

**BOX 2** ☒ I want to file a charge of discrimination, and I authorize the EEOC to look into the discrimination I described above. I understand that **the EEOC must give the employer, union, or employment agency that I accuse of discrimination information about the charge, including my name.** I also understand that the EEOC can only accept charges of job discrimination based on race, color, religion, sex, national origin, disability, age, genetic information, or retaliation for opposing discrimination.

Robert Fuelmer  
Signature

7/22/16  
Today's Date

PRIVACY ACT STATEMENT: This form is covered by the Privacy Act of 1974: Public Law 93-579. Authority for requesting personal data and the uses thereof are:

- 1) FORM NUMBER/TITLE/DATE. EEOC Intake Questionnaire (9/20/08).
- 2) AUTHORITY. 42 USC § 2000e-5(b), 29 USC § 211, 29 USC § 626, 42 USC § 12117(a), 42 USC § 2000ff-6.
- 3) PRINCIPAL PURPOSE. The purpose of this questionnaire is to solicit information about claims of employment discrimination, determine whether the EEOC has jurisdiction over those claims, and provide charge filing counseling, as appropriate. Consistent with 29 CFR 1601.12(b) and 29 CFR 1626.8(c), this questionnaire may serve as a charge if it meets the elements of a charge.
- 4) ROUTINE USES. EEOC may disclose information from this form to other state, local and federal agencies as appropriate or necessary to carry out the Commission's functions, or if EEOC becomes aware of a civil or criminal law violation. EEOC may also disclose information to respondents in litigation, to congressional offices in response to inquiries from parties to the charge, to disciplinary committees investigating complaints against attorneys representing the parties to the charge, or to federal agencies inquiring about hiring or security clearance matters.
- 5) WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL FOR NOT PROVIDING INFORMATION. Providing this information is voluntary but the failure to do so may hamper the Commission's investigation of a charge. It is not mandatory that this form be used to provide the requested information.



March 28, 2016

Mr. Robert Faulkner  
32 Cambridge Road  
Verona, NJ 07044

Dear Mr. Faulkner,

This letter is confirmation that we have received from you today your documentation dated 03/24/2016.

As stated in Article XV, Section (i) of the Actual labor Agreement, the Company has the right to terminate your employment.

Due to the circumstances of your absences, a more thorough investigation will take place to determine if further disciplinary action up to termination from this employer should take place.

Therefore, you are suspended without pay until further investigation.

Please bring in any supporting documentation or documentation from court to assist us with your employment determination.

Please do not hesitate to contact me if you should have any questions.

Sincerely,

Bea Scotti  
VP, HR & Labor Relations  
[Bea.scotti@manischewitz.com](mailto:Bea.scotti@manischewitz.com)  
201-553-1100 ext 2800

CC: Employee File  
Local Union



April 4, 2016

Mr. Robert Faulkner  
32 Cambridge Road  
Verona, NJ 07044

Dear Mr. Faulkner,

We hope that you are well.

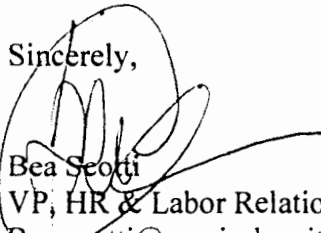
It is the goal of The Manischewitz Company to provide our employees a safe and comfortable work environment, free of harassment and violence. Based on the documentation presented to us by you, it was determined that your incarceration was because of a violent act (Domestic violence) in your home.

We do not tolerate any type of violence behavior from our employees. Therefore, due to the nature of your incarceration and our need to provide our employees with a safe environment, we have no choice but to terminate your employment effective immediately,

We wish you the best in your future endeavors.





Please do not hesitate to contact me if you should have any questions.

Sincerely,



Bea Scotti  
VP, HR & Labor Relations  
[Bea.scotti@manischewitz.com](mailto:Bea.scotti@manischewitz.com)  
201-553-1100 ext 2800

CC: Employee File  
Local Union

**From:** "Beatriz Scotti" <bea.scotti@manischewitz.com>  
**To:** pnfaicco@optimum.net, "pnfaicco@optonline.com" <pnfaicco@optonline.net>  
**Date:** 04/04/2016 12:35:10 PM  
**Subject:** Robert Faulkner  
**Attachments:** image001.png (2KB), image002.png (2KB), Letter term faulkner 2.doc (425KB),  
Letter term faulkner.doc (425KB)

Good Moring Phil,

Attached you will find letter of suspension and termination for former employee Robert Faulkner. Mr. Faulker just made union initiation in early March 2016. Unfortunately he was incarcerated for almost two weeks due to domestic violence. Even though we hire employees with a non-violent past record. We always believe in giving people a second a chance. In this instance, Mr. Faulkner committed the crimes while employed at our company and therefore in our constant effort to keep our employees in a safe and non-violent work place, we cannot accept his continued breaks with the law.

Therefore he was terminated effective today 04/04/2016.

Please do not hesitate to contact me with any questions.

*Bea Scotti*

Vice President of Human Resources & Labor Relations

*The Manischewitz Company*

80 Avenue K

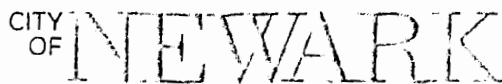
Newark, New Jersey 07105

(201) 553-1100 ext 2800

[bea.scotti@manischewitz.com](mailto:bea.scotti@manischewitz.com)



[www.manischewitz.com](http://www.manischewitz.com)



Victoria F. Pratt  
Chief Judge  
Municipal Court of the City of Newark

James Simpson  
Municipal Court Director  
973-733-8116

Customer Service  
973-733-6520

JULY 06, 2016

ROBERT L. FAULKNER  
32 CAMBRIDGE ROAD  
VERONA, NJ 07044

DOCKET: W-2016-005083  
CHARGE: 2C:12-1A-(SIMPLE ASSAULT)  
2C:17-3A(1)-(CRIMINAL MISCHIEF-DAMAGE PROPERTY)  
DATE OF BIRTH: 10-16-1968  
DATE OF INCIDENT: 03-13-2016

Dear Sir or Madam:

THE COURT ACKNOWLEDGES RECEIPT OF YOUR COMMUNICATIONS REGARDING THE ABOVE MATTER.  
THE OFFICIAL COURT RECORDS INDICATE THE FOLLOWING ADJUDICATION:

☐ NOT GUILTY

☐ GUILTY: FINE ☐ COST ☐ JAIL ☐ VCCB ☐ LREK ☐

PROBATION ☐ JAIL SUSPENDED ☐ SN ☐ DEDR ☐ DA ☐

COMMUNITY SERVICE ☐ RT ☐ SL ☐ MISC. FEES ☐

☒ DISMISSED: (1) ☒ (2) ☒ SUPERIOR COURT ☐ PLEA AGREEMENT ☐

LACK OF PROSECUTION ☐ WRONG DEFT. ☐ LACK OF WITNESS ☐

MERGED ☐ PROS. MOTION/REQ. OF VICTIM ☐ PROSECUTORIAL DISCR. ☐

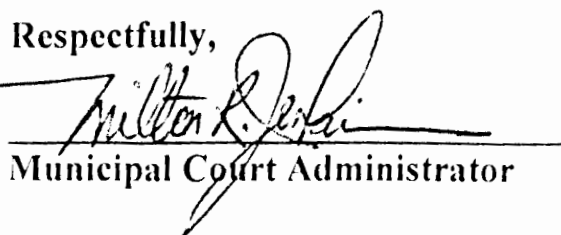
☐ FIRST OFFENDER'S PROGRAM

☐ CONDITIONAL DISCHARGE

☒ OTHER: HON. SHARIFAH R. SALAAM DISMISSED CASE ON 07/06/2016

If you should require any additional information, please feel free to contact our Customer Service Call Center at (973) 733-6520.

Respectfully,

  
Municipal Court Administrator





April 27, 2016

To whom it may concern;

This letter is to serve as confirmation that Mr Robert Faulkner was employed with The Manischewitz Company in the position of Matzo Line General Helper from 10/11/2015 to 04/04/2016.

Unfortunately due to low sales margins and lack of production we had no alternative (in agreement with Local 359) but to layoff certain employees in our plant.

If you require further information, please do not hesitate to contact me at the number below.

Sincerely,



*Bea Scotti*

Director of Human Resources and Labor Relations  
The Manischewitz Company  
[Bea.scotti@manischewitz.com](mailto:Bea.scotti@manischewitz.com)  
201-553-1100 ext 2800

*ATT. MRS. MUHAMMAD*

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TRANSMISSION VERIFICATION REPORT

TIME : 04/29/2016 10:38  
NAME :  
FAX :  
TEL :  
SER. # : U63274C5J912430

DATE, TIME  
FAX NO./NAME  
DURATION  
PAGE(S)  
RESULT  
MODE

04/29 10:38  
19736482469  
00:00:15  
01  
OK  
STANDARD  
ECM



**THE**  
**Manischewitz**  
COMPANY

April 27, 2016

To whom it may concern;

This letter is to serve as confirmation that Mr Robert Faulkner was employed with The Manischewitz Company in the position of Matzo Line General Helper from 10/11/2015 to 04/04/2016.

Unfortunately due to low sales margins and lack of production we had no alternative (in agreement with Local 359) but to layoff certain employees in our plant.

If you require further information, please do not hesitate to contact me at the number below.

Sincerely,



**Bea Scotti**

Director of Human Resources and Labor Relations  
The Manischewitz Company  
[Bea.scotti@manischewitz.com](mailto:Bea.scotti@manischewitz.com)  
201-553-1100 ext 2800



Recruiters  
Lilliana Diaz  
Vanessa Tejada

e-mail: [newark@irg.io](mailto:newark@irg.io)

District Manager  
Juanita Gonzalez  
e-mail: [jgonzalez@irg.io](mailto:jgonzalez@irg.io)

**irg**  
Intelligent Resource Group

125 Bloomfield Ave.  
Newark, NJ 07104  
Phone (973) 497-7060  
Fax (973) 497-7062

Human Resource Services and Contingency Staffing Made Easy

*non union worker's  
working 40+ hours  
a week.*

**STAFF**  
MANAGEMENT GROUP

383 Walnut Street  
Newark, NJ 07105  
[www.staffmg.com](http://www.staffmg.com)

Phone: (973) 587-0370  
Fax: (973) 350-1105



05/03/16

Ref: Robert Faulkner

SS#142-74-0746

To Whom It May Concern:

This letter is to certify that Mr. Faulkner was laid-off on 4/4/16 due to lack of work.

I completed a form on 4/19/16 and stated he was terminated due to violation of company policy which was a mistake in my part. After speaking to Beatriz Scottie VP of Human Resources found out it was due to downsizing.

If you have any other questions regarding Mr. Faulkner please feel free to call me at (201) 553-1100#2413.

Sincerely yours,

Elizabeth Rosario

Payroll Administrator

**UNITED SEAFOOD WORKERS UNION**



524-2016-01089

April 11, 2016

~~524-524~~

Mr. Robert Faulkner

32 Cambridge Road

Verona, N.J. 07044

The Executive Committee of Local 359 has denied your request to arbitrate against the Manischewitz Company. Enclosed with this letter are e-mails regarding your case.

Please don't hesitate to contact the union office with any questions involving this matter.

Local 359 UFCW

Executive Committee

90 John Street (Suite 303)

New York, N.Y. 10038

(212) 233-1660

EEOC NEWARK  
AREA OFFICE

2017 JAN 10 AM 8:29

RECEIVED

**Dennis Falcco**  
President

**Timothy Donoghue**  
Secretary-Treasurer

**Local 359**  
**United Food & Commercial Workers**  
**Union**  
90 John Street, Suite 303  
New York, NY 10038-2099  
(212) 233-1660

Please visit our website at [www.ffmlocal359.org](http://www.ffmlocal359.org)



**UNITED SEAFOOD WORKERS UNION**

Robert Faulkner  
32 Cambridge Road  
Verona, NJ 07044

04/20/2016

Dear Brother Faulkner,

At your request we advised our Executive Board you wish to appeal there decision regarding the filing of Arbitration on your behalf, as you are aware the schedule date is 4/27/16 at 7:30AM Hunts Point Fish Market 800 Food Center Drive New York, NY 10474. Meeting is at the Market Café.

Dennis Faicco- President Local 359

A handwritten signature in black ink that reads "Dennis Faicco".

Certified Mail# 7015 1520 0003 5277 6728

**Dennis Faicco**  
President

**Timothy Donoghue**  
Secretary-Treasurer

**Local 359**  
**United Food & Commercial Workers**  
**Union**  
90 John Street, Suite 303  
New York, NY 10038-2099  
(212) 233-1660

Please visit our website at [www.ffmlocal359.org](http://www.ffmlocal359.org)

~~April 25, 2016~~

Dear Member,

Our union strives to ensure the best possible representation for all of its members. It is important that we work together as a team to achieve our goals. Please be informed that all grievances must be submitted to the union office in writing. This helps promote efficiency in the unions procedure when dealing with Management on your behalf.

I have always stressed how important it is for union members to document problems in the form of written grievances. I feel it is necessary to remind everyone that there are Shop Stewards on both day and night shifts. Your Stewards are available to help you fill out grievance forms if you should need to.

As always, you can contact the union office @ (212) 233-1660. You can also fax us @ 212 349-8176. We are always available to help.

Sincerely,

A handwritten signature in black ink, appearing to read "Dennis Faicco". The signature is fluid and cursive, with the first name "Dennis" written in a larger, more prominent script than the last name "Faicco".

Dennis Faicco

President





**UNITED SEAFOOD WORKERS UNION**

90 John Street, Suite 303, NEW YORK, NY 10038

Tel : (212) 233-1660

FAX: (212) 349-8176

**May 10, 2016**

Dear Robert Faulkner,

**On May 3, 2016** you contacted the union office. You stated that you were denied your unemployment benefits by the company. We contacted Manischewitz and HR assured us that this was not the case.

Please see the attached letter that was sent from the company on May 3, 2016 to the Unemployment Office. Please contact us immediately if there are any further issues regarding this matter.

Local 359

Executive Committee

Dennis Faicco  
President

Jeffrey Sabbatino  
Secretary-Treasurer

Local 359  
United Food & Commercial Workers  
Union, AFL-CIO & CLC  
140 Beekman Street, NY  
New York 10038-2099  
(212) 233-1660



**UNITED SEAFOOD WORKERS UNION**

---

July 13, 2016

Robert Faulkner  
32 Cambridge Road  
Verona, N.Y. 07044


Telephone 973-857-8930

Dear Brother Faulkner,

This office is in receipt of your memo dated July 7, 2016 along with City of Newark papers from the Municipal Court of the City of Newark dated July 6, 2016, as well as a letter from the County of Essex Department of Corrections, Essex County Correctional Facility dated March 24, 2016 showing your incarceration from March 15, 2016 through March 24, 2016. In your cover memo you're requesting another review from the Union's Executive Board.

Enclosed please find a correspondence sent to the Executive Board for review. You will be notified of their decision.

Thank you in advance  
Fraternally,

  
Dennis Faicco

**Dennis Faicco**  
President

**Timothy Donoghue**  
Secretary-Treasurer

**Local 359**  
**United Food & Commercial Workers**  
**Union**  
90 John Street, Suite 303  
New York, NY 10038-2099  
(212) 233-1660

Please visit our website at [www.ffmlocal359.org](http://www.ffmlocal359.org)



**UNITED SEAFOOD WORKERS UNION**

July 13, 2016

Executive Committee  
Local 359

RE: Robert Faulkner  
Telephone 973-857-8930

Dear Brothers,

With respect to correspondences from this office dated April 11, 2016, April 20, 2016, April 25, 2016, and May 10, 2016 as well as all other papers sent to this office. Brother Faulkner's memo dated July 7, 2016 wants this matter resolved before other steps are taken.

Fraternally

A handwritten signature in black ink, appearing to read "Dennis Faicco".  
Dennis Faicco

Cc: Timothy Donoghue  
Paul Ackerman  
James Giammanco  
Edgar Galarza  
Robert Lombardi  
Nelson Orengo

Cc: Warren Mangan, Esq.

**Dennis Faicco**  
President

**Timothy Donoghue**  
Secretary-Treasurer

**Local 359**  
**United Food & Commercial Workers**  
**Union**  
90 John Street, Suite 303  
New York, NY 10038-2099  
(212) 233-1660

Please visit our website at [www.ffmlocal359.org](http://www.ffmlocal359.org)



**UNITED SEAFOOD WORKERS UNION**

---

July 13, 2016

Robert Faulkner  
32 Cambridge Road  
Verona, N.Y. 07044

Telephone 973-857-8930

Dear Brother Faulkner,

I am in receipt of your memo dated July 7, 2016. As you are aware on April 11, 2016 the Executive Committee of Local 359 denied your request to arbitrate. On April 27, 2016 the decision regarding arbitration was denied once again.

Thank you in advance  
Fraternally,

  
Dennis Faicco

Dennis Faicco  
President

Timothy Donoghue  
Secretary-Treasurer

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Union  
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